

## Court of Appeal, First Appellate District Mediator's Statement

PLEASE MAIL WITHIN 10 DAYS OF THE COMPLETION OF THE MEDIATION TO:

JOHN TOKER, MEDIATION PROGRAM ADMINISTRATOR

COURT OF APPEAL, FIRST APPELLATE DISTRICT

350 McALLISTER STREET

SAN FRANCISCO, CA 94102

OR FAX TO 415-865-7374

***Please complete this statement without breaching confidentiality.***

**TODAY'S DATE:** \_\_\_\_\_

**Case Name:** \_\_\_\_\_ **Case No:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Type of case:**

☐ Business/Contract

☐ Insurance

☐ Personal Injury

☐ Construction

☐ Intellectual Property

☐ Prof. Negl. (Non-Medical)

☐ Employment

☐ Medical Malpractice

☐ Real Estate

☐ Family Law

☐ Partnership

☐ Other (*specify*): \_\_\_\_\_

**Preparation time (*in tenths*):** \_\_\_\_\_ **hours**

**Total session time (*in tenths*):** \_\_\_\_\_ **hours**

**No. of sessions:** \_\_\_\_\_

**Follow up time (*in tenths*):** \_\_\_\_\_ **hours**

**Total mediation fee for all parties (if any):** \$ \_\_\_\_\_ **Total expenses (if any):** \$ \_\_\_\_\_

**How did the case resolve?:**

\_\_\_ Full resolution      \_\_\_ Resolution of some issues (*How many?:* \_\_\_\_\_)      \_\_\_ No resolution

\_\_\_ Other (*specify*) \_\_\_\_\_

**The case did not fully resolve because:**

\_\_\_ An essential party did not participate      \_\_\_ One or more of the parties did not have authority to settle

\_\_\_ The parties reached an impasse      \_\_\_ Other (*specify*): \_\_\_\_\_

**If the mediation resolved more than one dispute, check all that were resolved:**

\_\_\_ Another appeal

\_\_\_ A trial court matter

\_\_\_ A matter not in litigation

**Was your primary style in this case**

\_\_\_ **Facilitative**

\_\_\_ **Directive/Evaluative?**

**Were counsel**

\_\_\_ **Trial attorneys**

\_\_\_ **Appellate attorneys**

\_\_\_ **Both?**

**Did you distribute evaluation forms?**

\_\_\_ **Yes**

\_\_\_ **No**

**On a scale of 1 (*very dissatisfied*) to 5 (*very satisfied*) please rate the Court's mediation program as to:**

\_\_\_ **Efficiency (*scheduling, etc.*)**

\_\_\_ **Paperwork**

\_\_\_ **Courtesy and cooperation**

\_\_\_ **Pro bono requirement**

**Comments on the above, including suggestions for program improvements:**